

Application of Docket Number

Substitute for Form PTO-575

Application of Doctor Number
10/11/628

(Column 1)

fColumn 2)

SMALL ENTITY

OR

**OTHER THAN
SMALL ENTITY**

MULTIPLE OFFER/INVENT CLAIM PRESENT (37 CFR 1.160)

• If the difference in column 1 is less than zero, enter "0" in column 2.

5/15/06

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

02

OTHER THAN
SMALL ENTITY

AP FIRST PRESENTATION OF MULTIPLE DEFICIENT DATA UNDER A H.

Application Size Fee (37 CFR 1.16(s))

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For, IN THIS SPACE" is less than 20, enter "20"

... If the Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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